

**Fill in this information to identify your case:**

Debtor 1 Steven Bloom  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Michigan

Case number 21-30257  
(If known)

☐ Check if this is an amended filing

**Official Form 106Sum****Summary of Your Assets and Liabilities and Certain Statistical Information 12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

**Part 1: Summarize Your Assets**

		<b>Your assets</b> Value of what you own
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....		\$ <u>24,394.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....		\$ <u>66,181.00</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....		\$ <u>90,575.00</u>

**Part 2: Summarize Your Liabilities**

		<b>Your liabilities</b> Amount you owe
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)		
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....		\$ <u>65,086.00</u>
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....		\$ <u>9,076.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....		+ \$ <u>179,675.00</u>
<b>Your total liabilities</b>		\$ <u>253,837.00</u>

**Part 3: Summarize Your Income and Expenses**

4. <i>Schedule I: Your Income</i> (Official Form 106I)		
Copy your combined monthly income from line 12 of <i>Schedule I</i> .....		\$ <u>0.00</u>
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)		
Copy your monthly expenses from line 22c of <i>Schedule J</i> .....		\$ <u>5,701.93</u>

**Part 4: Answer These Questions for Administrative and Statistical Records****6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 0.00

**9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*.****Total claim****From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 9,076.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$ 9,076.00

Debtor 1	Steven Bloom		
	First Name	Middle Name	Last Name

Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: Eastern District of  
Michigan

Case number 21-30257  
(if know)

☐ Check if this is an amended filing

12/15

- ☐ No. Go to Part 2
- ☒ Yes. Where is the property?

1.1 15225 Lakeview Drive  
Street address, if available, or other description

Nunda Township MI 49705

City State ZIP Code

Cheboygan County

Country

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
\$ 4,725.00	\$ 4,725.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Fee simple

☐ Check if this is community property

- 1.2 Mont Gabriel Sub No 2, Lot 223  
Street address, if available, or other description

Nunda Township MI 49705

City State ZIP Code

Cheboygan County

Country

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
\$ 2,079.00	\$ 2,079.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

### Tenancy by the Entireties

☐ Check if this is community property

1.3 15097 Avenue Du Chalet  
Street address, if available, or other description

Nunda Township MI 49705

City State ZIP Code

Cheboygan County

Country

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property?** **Current value of the portion you own?**

\$ 2,079.00

\$ 2,079.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Tenancy by the Entireties

☐ Check if this is community property

1.4 15157 Avenue Du Chalet  
Street address, if available, or other description

Nunda Township MI 49705

City State ZIP Code

Cheboygan County

Country

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property?** **Current value of the portion you own?**

\$ 2,160.00

\$ 2,160.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Tenancy by the Entireties

☐ Check if this is community property

1.5 15111 Avenue Du Chalet  
Street address, if available, or other description

Nunda MI 49705

City State ZIP Code

Cheboygan County

Country

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property?** **Current value of the portion you own?**

\$ 2,200.00

\$ 2,200.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Fee simple

☐ Check if this is community property

1.6 14542 Shore Line Drive  
Street address, if available, or other description

Nunda Township MI 49705

City State ZIP Code

Cheboygan County

Country

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property?** **Current value of the portion you own?**

\$ 1,890.00

\$ 1,890.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Fee simple

☐ Check if this is community property

1.7 Mont Gabriel Sub Lots 101 & 102  
Street address, if available, or other description

Nunda Township MI 49705

City State ZIP Code

Cheboygan County

Country

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property?** **Current value of the portion you own?**

\$ 3,780.00

\$ 3,780.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Tenancy by the Entireties

☐ Check if this is community property

1.8 15231 Lakeview Drive  
Street address, if available, or other description

Nunda Township MI 49705

City State ZIP Code

Cheboygan County

Country

**What is the property?** Check all that apply

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☒ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property?** **Current value of the portion you own?**

\$ 5,481.00

\$ 5,481.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Tenancy by the Entireties

☐ Check if this is community property

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....>

\$ 24,394.00

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No  
☒ Yes

3.1 Make: Volkswagen  
Model: Beetle-7867  
Year: 2002  
Approximate mileage: 225,000  
Other information:

Condition: Poor;

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>100.00</u>	\$ <u>100.00</u>

3.2 Make: Volkswagen  
Model: Beetle-0165  
Year: 2002  
Approximate mileage: 2000,000  
Other information:

Condition: Poor;

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>100.00</u>	\$ <u>100.00</u>

3.3 Make: Plymouth  
Model: Volare  
Year: 1979  
Approximate mileage: 180,000  
Other information:

Condition: Poor;

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>600.00</u>	\$ <u>600.00</u>

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☐ No  
☒ Yes

4.1 Make: Damon  
Model: \_\_\_\_\_  
Year: 2007  
Other information:

Condition: Good;

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>40,000.00</u>	\$ <u>40,000.00</u>

4.2 Make: Sno Pro  
Model: \_\_\_\_\_  
Year: 2004  
Other information:

Condition: Fair;

Who has an interest in the property? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>100.00</u>	\$ <u>100.00</u>

4.3 Make: Foster  
Model: Trailer  
Year: 2012  
Other information:

Condition: \_\_\_\_\_

Who has an interest in the property? Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>500.00</u>	\$ <u>500.00</u>

4.4 Make: Polaris  
Model: 4 Wheeler  
Year: 2001  
Other information:

Condition: Poor;

Who has an interest in the property? Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property?	Current value of the portion you own?
\$ <u>75.00</u>	\$ <u>75.00</u>

4.5 Make: Side by Side

Model: ATV

Year: \_\_\_\_\_

Other information:

Condition: Good;

**Who has an interest in the property?** Check one

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property?**

\$ 4,000.00

**Current value of the portion you own?**

\$ 4,000.00

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....>

\$ 45,475.00

### Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

#### 6. Household goods and furnishings

*Examples:* Major appliances, furniture, linens, china, kitchenware

- ☐ No  
☒ Yes. Describe...

Various Household Goods, Furnishings, Appliances

\$ 3,000.00

#### 7. Electronics

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☐ No  
☒ Yes. Describe...

2 Televisions-(1) 55"-\$200.00  
(1) 65"-\$150.00  
Cell Phone \$100.00  
1 Desktop \$500.00  
2 Laptops \$700.00

\$ 1,650.00

#### 8. Collectibles of value

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☒ No  
☐ Yes. Describe...

#### 9. Equipment for sports and hobbies

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☒ No  
☐ Yes. Describe...

#### 10. Firearms

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

- ☐ No  
☒ Yes. Describe...

12 Gauge Shot Gun \$150.00  
22 Caliber Hand Gun \$100.00

\$ 250.00

#### 11. Clothes

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- ☐ No  
☒ Yes. Describe...

Wearing Apparel

\$ 150.00

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems  
gold, silver

- ☐ No  
☒ Yes. Describe...

Wedding Ring \$400.00  
Watches \$ 20.00

\$ 420.00

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

- ☒ No  
☐ Yes. Describe...

**14. Any other personal and household items you did not already list, including any health aids you did not list**

- ☒ No  
☐ Yes. Give specific information...

**15. Add the dollar value of the portion you own for all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here.....**

\$ 5,470.00

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the  
portion you own?**

Do not deduct secured  
claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☐ No  
☒ Yes..... Cash ..... \$ 20.00

**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses  
and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No  
☒ Yes.....
- |                         |  |                    |
|-------------------------|--|--------------------|
| 17.1. Checking account: | Institution name:<br>Chase Bank ending "5127"        | \$ <u>8.00</u>     |
| 17.2. Checking account: | MSU Federal Credit Union checking & Savings ending " | \$ <u>106.00</u>   |
| 17.3. Checking account: | Cornerstone Community Credit Union                   | \$ <u>10.00</u>    |
| 17.4. Checking account: | 1st National Bank ending "014"                       | \$ <u>1,025.00</u> |

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ☐ No  
☒ Yes.....  
Institution or issuer name:

Family Wireless #1 LLC \$ 0.00  
Bloom and Sons Trucking \$ 0.00

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

- ☒ No  
☐ Yes. Give specific information about them.....

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No  
☐ Yes. Give specific information about them.....



**21. Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No☒ Yes. List each account separately

Type of account

Institution name

IRA:

Ameritrade\$ 1,667.00

IRA:

Franklin Templeton Investments\$ 1,400.00**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No☐ Yes.....**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes.....**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes.....**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☒ No☐ Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No☐ Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No☐ Yes. Give specific information about them...**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...

--

Federal:

\$ 0.00

State:

\$ 0.00

Local:

\$ 0.00**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No☐ Yes. Give specific information....**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No☐ Yes. Give specific information....

**31. Interests in insurance policies**

- ☐ No  
☒ Yes. Name the insurance company of each policy and list its value....

Company name:	Beneficiary:	Surrender or refund value:
<u>Whole Life Insurance-Face Amount-25,000.00</u>	<u>Wife</u>	\$ <u>0.00</u>
<u>Whole Life Insurance-Face Amount-25,000.00</u>	<u>Wife</u>	\$ <u>0.00</u>

**32. Any interest in property that is due you from someone who has died**

- ☒ No  
☐ Yes. Give specific information....

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

- ☒ No  
☐ Yes. Give specific information....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No  
☐ Yes. Give specific information....

**35. Any financial assets you did not already list**

- ☒ No  
☐ Yes. Give specific information...

**36. Add the dollar value of the portion you own for all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....>**

**\$4,236.00**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.  
☐ Yes. Go to line 38.

**Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**

**Part 6:** If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples: Season tickets, country club membership*

- ☐ No  
☒ Yes. Give specific information...

Kobota, Zero Turn Mower

**54. Add the dollar value of all of your entries from Part 7. Write that number here .....>**

**\$11,000.00**

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2.....>			\$24,394.00
56. Part 2: Total vehicles, line 5	\$ 45,475.00		
57. Part 3: Total personal and household items, line 15	\$ 5,470.00		
58. Part 4: Total financial assets, line 36	\$ 4,236.00		
59. Part 5: Total business-related property, line 45	\$ 0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00		
61. Part 7: Total other property not listed, line 54	+ \$ 11,000.00		
62. Total personal property. Add lines 56 through 61 .....	\$ 66,181.00	Copy personal property total>	+ \$ 66,181.00
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$ 90,575.00

**Fill in this information to identify your case:**

Debtor 1 Steven Bloom  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) \_\_\_\_\_  
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Michigan

Case number 21-30257  
(if known)

☐ Check if this is an amended filing

**Official Form 106C****Schedule C: The Property You Claim as Exempt****4/19**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt****1. Which set of exemptions are you claiming?** Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

**2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Brief description: 15225 Lakeview Drive	\$ <u>4,725.00</u>	<input checked="" type="checkbox"/> \$ <u>4,725.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Line from Schedule A/B: 1.1 Mont Gabriel Sub No 2, Lot 223	\$ <u>2,079.00</u>	<input checked="" type="checkbox"/> \$ <u>2,079.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(b)(3)(b)
Line from Schedule A/B: 1.2 15097 Avenue Du Chalet	\$ <u>2,079.00</u>	<input checked="" type="checkbox"/> \$ <u>2,079.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(b)(3)(b)
Line from Schedule A/B: 1.3			

**3. Are you claiming a homestead exemption of more than \$170,350?**

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
15157 Avenue Du Chalet Brief description: Line from Schedule A/B: 1.4	\$2,160.00	<input checked="" type="checkbox"/> \$ 2,160.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(b)(3)(b)
15111 Avenue Du Chalet Brief description: Line from Schedule A/B: 1.5	\$2,200.00	<input checked="" type="checkbox"/> \$ 2,200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
14542 Shore Line Drive Brief description: Line from Schedule A/B: 1.6	\$1,890.00	<input checked="" type="checkbox"/> \$ 1,890.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Mont Gabriel Sub Lots 101 & 102 Brief description: Line from Schedule A/B: 1.7	\$3,780.00	<input checked="" type="checkbox"/> \$ 3,780.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(b)(3)(b)
15231 Lakeview Drive Brief description: Line from Schedule A/B: 1.8	\$5,481.00	<input checked="" type="checkbox"/> \$ 5,481.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(b)(3)(b)
2002 Volkswagen Beetle-7867 Brief description: Line from Schedule A/B: 3.1	\$100.00	<input checked="" type="checkbox"/> \$ 100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
2002 Volkswagen Beetle-0165 Brief description: Line from Schedule A/B: 3.2	\$100.00	<input checked="" type="checkbox"/> \$ 100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
1979 Plymouth Volare Brief description: Line from Schedule A/B: 3.3	\$600.00	<input checked="" type="checkbox"/> \$ 600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(2)
2004 Sno Pro Brief description: Line from Schedule A/B: 4.2	\$100.00	<input checked="" type="checkbox"/> \$ 100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
2012 Foster Trailer Brief description: Line from Schedule A/B: 4.3	\$500.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
2001 Polaris 4 Wheeler Brief description: Line from Schedule A/B: 4.4	\$75.00	<input checked="" type="checkbox"/> \$ 75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Household goods - Various Household Goods, Furnishings, Appliances Brief description: Line from Schedule A/B: 6	\$3,000.00	<input checked="" type="checkbox"/> \$ 3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Electronics - 2 Televisions-(1) 55'-\$200.00 Brief description: (1) 65'-\$150.00 Cell Phone \$100.00 1 Desktop \$500.00 Line from 2 Laptops \$700.00 Schedule A/B: 7	\$1,650.00	<input checked="" type="checkbox"/> \$ 1,650.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Firearms - 12 Gauge Shot Gun \$150.00 Brief description: 22 Caliber Hand Gun\$100.00 Line from Schedule A/B: 10 Clothing - Wearing Apparel	\$250.00	<input checked="" type="checkbox"/> \$ 250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Brief description: Line from Schedule A/B: 11 Jewelry - Wedding Ring \$400.00 Watches \$ 20.00	\$150.00	<input checked="" type="checkbox"/> \$ 150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Brief description: Line from Schedule A/B: 12 Cash (Cash On Hand)	\$420.00	<input checked="" type="checkbox"/> \$ 420.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(4)
Brief description: Line from Schedule A/B: 16 Chase Bank ending "5127" (Checking)	\$20.00	<input checked="" type="checkbox"/> \$ 20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief description: Line from Schedule A/B: 17.1 MSU Federal Credit Union checking & Savings ending "	\$8.00	<input checked="" type="checkbox"/> \$ 8.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Brief description: Line from Schedule A/B: 17.2 Cornerstone Community Credit Union (Checking)	\$106.00	<input checked="" type="checkbox"/> \$ 106.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Brief description: Line from Schedule A/B: 17.3 Cornerstone Community Credit Union (Checking)	\$10.00	<input checked="" type="checkbox"/> \$ 10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Brief description: Line from Schedule A/B: 17.3 1st National Bank ending "014" (Checking)	\$10.00	<input checked="" type="checkbox"/> \$ 106.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
Brief description: Line from Schedule A/B: 17.4 Ameritrade	\$1,025.00	<input checked="" type="checkbox"/> \$ 1,025.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522 (d)(5)
Brief description: Line from Schedule A/B: 21 Franklin Templeton Investments	\$1,667.00	<input checked="" type="checkbox"/> \$ 1,667.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(12)
Brief description: Line from Schedule A/B: 21	\$1,400.00	<input checked="" type="checkbox"/> \$ 1,400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(12)

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Whole Life Insurance-Face Amount-25,000.00 Brief description: Line from Schedule A/B: 31	\$0.00	<input checked="" type="checkbox"/> \$ 0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(7)
Whole Life Insurance-Face Amount-25,000.00 Brief description: Line from Schedule A/B: 31	\$0.00	<input checked="" type="checkbox"/> \$ 168.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(8)
Whole Life Insurance-Face Amount-25,000.00 Brief description: Line from Schedule A/B: 31	\$0.00	<input checked="" type="checkbox"/> \$ 0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(7)
Whole Life Insurance-Face Amount-25,000.00 Brief description: Line from Schedule A/B: 31	\$0.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(8)
Brief description: Line from Schedule A/B:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

**Fill in this information to identify your case:**

Debtor 1	Steven Bloom		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Michigan			
Case number (if know)	21-30257		

Official Form 106D

## 12/15

**1. Do any creditors have claims secured by your property?**

- ### Part 1: List All Secured Claims

Column C  
Unsecured  
portion If any

page 1 of 2



2.3

Describe the property that secures the claim: \$ 9,946.00 \$ 9,000.00 \$ 946.00

Kubota Tractor Corp

Creditor's Name

Attn: Customer Satisfaction

Number Street

1000 Kubota Drive

Grapevine TX 76051

City State ZIP Code

Who owes the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred

Kobota - \$9,000.00

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 65,086.00

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

**Fill in this information to identify your case:**

Debtor 1 Steven Bloom  
 First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Michigan

Case number 21-30257  
 (if know)

☐ Check if this is an amended filing

Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.
- ☒ Yes.

**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount	
2.1	<p>Internal Revenue Service            Priority Creditor's Name            Centralized Insolvency Unit            Number Street            P.O. Box 7346            Philadelphia PA 19101-7346            City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim relates to a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b>  <b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of PRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Domestic support obligations  <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government  <input type="checkbox"/> Claims for death or personal injury while you were intoxicated  <input type="checkbox"/> Other. Specify _____</p>	\$ 8,500.00	\$ Unknown	\$ 8,500.00
2.2	<p>State of Michigan-Dept. of Treasury            Priority Creditor's Name            Attn: Collection Svcs Bureau/Bankruptcy            Number Street            P.O. Box 30149            Lansing MI 48909            City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim relates to a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b>  <b>When was the debt incurred?</b> 2019</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of PRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Domestic support obligations  <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government  <input type="checkbox"/> Claims for death or personal injury while you were intoxicated  <input type="checkbox"/> Other. Specify _____</p>	\$ 576.00	\$ 576.00	\$ 0.00

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**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing else to report in this part. Submit to the court with your other schedules.
- ☒ Yes. Fill in all of the information below.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	<p>American Express Nonpriority Creditor's Name</p> <p>P.O. Box 981537 Number Street El Paso TX 79998 City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 9992 When was the debt incurred? 02/2020</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p> <p>\$ 3,028.00</p>
4.2	<p>Capital One Bank USA Nonpriority Creditor's Name</p> <p>P.O. Box 31293 Number Street Salt Lake City UT 84131 City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 6301 When was the debt incurred? 08/2011</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p> <p>\$ 1,625.00</p>
4.3	<p>Capital One/Kohl's Nonpriority Creditor's Name</p> <p>N56 Ridgewood Drive Number Street Menomonee Falls WI 53051 City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 3905 When was the debt incurred? 11/2005</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p> <p>\$ 2,235.00</p>

4.4	<p>Capital One/Menards</p> <p>Nonpriority Creditor's Name</p> <p>P.O. Box 31293</p> <p>Number Street</p> <p>Salt Lake City UT 84131</p> <p>City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> 0430</p> <p><b>When was the debt incurred?</b> 01/2021</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	\$ 229.00
4.5	<p>Capital One/Walmart</p> <p>Nonpriority Creditor's Name</p> <p>P.O. 31293</p> <p>Number Street</p> <p>Salt Lake City UT 84131</p> <p>City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> 3220</p> <p><b>When was the debt incurred?</b> 12/2020</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	\$ 696.00
4.6	<p>CBNA</p> <p>Nonpriority Creditor's Name</p> <p>50 Northwest Point Rd.,</p> <p>Number Street</p> <p>Elk Grove Village IL 60007</p> <p>City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> 6938</p> <p><b>When was the debt incurred?</b> 03/2017</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	\$ 3,126.00

4.7	CBNA/Exxon Mobile Nonpriority Creditor's Name P.O. Box 6497 Number Street Sioux Falls SD 57117 City State ZIP Code <b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> 0282 <b>When was the debt incurred?</b> <u>12/1989</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Notice Only	\$ <u>0.00</u>
4.8	CitiBank/Best Buy Nonpriority Creditor's Name P.O. Box 790441 Number Street Saint Louis MO 63179 City State ZIP Code <b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <b>When was the debt incurred?</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	\$ <u>2,886.00</u>
4.9	Comenity BAnk Nonpriority Creditor's Name P.O. Box 182120 Number Street Columbus OH 43218 City State ZIP Code <b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> 8098 <b>When was the debt incurred?</b> <u>04/2018</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ <u>3,844.00</u>

4.10	Comenity Bank/Gardner White Nonpriority Creditor's Name P.O. Box 18125 Number Street Columbus OH 43218 City State ZIP Code	<b>Last 4 digits of account number</b> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ 4,072.00
	<b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.11	Cornerstone Community Financial CU Nonpriority Creditor's Name 2955 University Drive Number Street Auburn Hills MI 48326 City State ZIP Code	<b>Last 4 digits of account number</b> 5571 <b>When was the debt incurred?</b> 02/2020 <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	\$ 8,511.00
	<b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.12	Home Depot/CBNA Nonpriority Creditor's Name P.O. Box 4697 Number Street Sioux Falls SD 57117 City State ZIP Code	<b>Last 4 digits of account number</b> 3532 <b>When was the debt incurred?</b> 7/2005 <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Notice Only	\$ 0.00
	<b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

4.13	<p>JP Morgan Chase Nonpriority Creditor's Name P.O. Box 15369 Number Street Wilmington DE 19850 City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> 7887 <b>When was the debt incurred?</b> 4/2005</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	\$ 977.00
4.14	<p>JP Morgan Chase Nonpriority Creditor's Name P.O. Box 15369 Number Street Wilmington DE 19850 City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> 6690 <b>When was the debt incurred?</b> 10/2019</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	\$ 5,781.00
4.15	<p>JP Morgan Chase/Southwest Nonpriority Creditor's Name P.O. Box 15369 Number Street Wilmington DE 19850 City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> 4720 <b>When was the debt incurred?</b> 04/2016</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>	\$ 6,000.00

4.16	<p>Kohl's</p> <p>Nonpriority Creditor's Name</p> <p>P.O. Box 3043</p> <p>Number Street</p> <p>Milwaukee WI 53201</p> <p>City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify</p>	\$ <u>2,141.00</u>
4.17	<p>LOC Federal Credit Union</p> <p>Nonpriority Creditor's Name</p> <p>22981 Farmington Road</p> <p>Number Street</p> <p>Farmington MI 48336</p> <p>City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> 5802</p> <p><b>When was the debt incurred?</b> <u>08/2018</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify</p>	\$ <u>6,457.00</u>
4.18	<p>Menards/Capital One</p> <p>Nonpriority Creditor's Name</p> <p>4777 Menard Drive</p> <p>Number Street</p> <p>Eau Claire WI 54703</p> <p>City State ZIP Code</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify</p>	\$ <u>200.00</u>



<b>4.19</b>	<p>On Deck</p> <hr/> <p>Nonpriority Creditor's Name</p> <hr/> <p>1400 Broadway FL 25</p> <hr/> <p>Number Street</p> <hr/> <p>New York NY 10018</p> <hr/> <p>City State ZIP Code</p> <hr/> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify loan</p>	<p><b>\$ 16,070.00</b></p>
<b>4.20</b>	<p>On Deck</p> <hr/> <p>Nonpriority Creditor's Name</p> <hr/> <p>1400 Broadway FL 25</p> <hr/> <p>Number Street</p> <hr/> <p>New York NY 10018</p> <hr/> <p>City State ZIP Code</p> <hr/> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Loan</p>	<p><b>\$ 19,000.00</b></p>
<b>4.21</b>	<p>Suntrust</p> <hr/> <p>Nonpriority Creditor's Name</p> <hr/> <p>600 W. Broadway, Ste., 2000</p> <hr/> <p>Number Street</p> <hr/> <p>San Diego CA 92101</p> <hr/> <p>City State ZIP Code</p> <hr/> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> 6880</p> <p><b>When was the debt incurred?</b> <u>7/2019</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify</p>	<p><b>\$ 50,473.00</b></p>

4.22	<p>Suntrust/Lightstream</p> <hr/> <p>Nonpriority Creditor's Name</p> <hr/> <p>PO Box 117320</p> <hr/> <p>Number Street</p> <hr/> <p>Atlanta GA 30368</p> <hr/> <p>City State ZIP Code</p> <hr/> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify</p>	\$ 40,000.00
4.23	<p>Synchrony Bank/Care Credit</p> <hr/> <p>Nonpriority Creditor's Name</p> <hr/> <p>PO Box 960061</p> <hr/> <p>Number Street</p> <hr/> <p>Orlando FL 32896</p> <hr/> <p>City State ZIP Code</p> <hr/> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify</p>	\$ 1,378.00
4.24	<p>Synchrony Bank/Lowes</p> <hr/> <p>Nonpriority Creditor's Name</p> <hr/> <p>P.O. Box 965005</p> <hr/> <p>Number Street</p> <hr/> <p>32896</p> <hr/> <p>City State ZIP Code</p> <hr/> <p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> 8192</p> <p><b>When was the debt incurred?</b> 01/2016</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Notice Only</p>	\$ 0.00

4.25	<u>U of M Hospital</u> Nonpriority Creditor's Name <u>Attn: H. R.</u> <u>Number Street</u> <u>1500 E Medical Center Dr</u> <u>Ann Arbor MI 48109</u> <u>City State ZIP Code</u>	<b>Last 4 digits of account number</b> <b>When was the debt incurred?</b> _____ <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Services</u>	<b>\$ 946.00</b>
<b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

American Express  
Creditor's Name  
P.O. Box 297871  
Number Street  
Fort Lauderdale FL 33329  
City State ZIP Code

**On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured

**Last 4 digits of account number**

Care Credit  
Creditor's Name  
950 Forrer Blvd.  
Number Street  
Dayton OH 45420  
City State ZIP Code

**On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured

Claims

**Last 4 digits of account number**

CitiCards  
Creditor's Name  
Centralized Bk Dept  
Number Street  
P.O. Box 790034  
Saint Louis MO 63179  
City State ZIP Code

**On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured

Claims

**Last 4 digits of account number****Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. \$ <u>9,076.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <u>0.00</u>
	6e. Total. Add lines 6a through 6d.	6e. <div style="border: 1px solid black; padding: 2px;">\$ <u>9,076.00</u></div>

		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ 179,675.00
	6j. Total. Add lines 6f through 6i.	6j. \$ 179,675.00

Fill in this information to identify your case:			
Debtor 1	Steven Bloom		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of Michigan			
Case number (if know)	21-30257		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?
- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease	State what the contract or lease is for

Fill in this information to identify your case:

Debtor 1 Steven Bloom  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing)   
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Michigan

Case number 21-30257  
(if know)

☐ Check if this is an amended filing

Official Form 106H

**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No

☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

Column 1: **Your codebtor**

Column 2: **The creditor to whom you owe the debt**  
Check all schedules that apply:

Debtor 1		
First Name	Middle Name	Last Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the: _ Eastern District of Michigan		
Case number	21-30257	
(If known)		

☐ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

12/15

### Part 1: Describe Employment

## Part 2: Give Details About Monthly Income

	For Debtor 1	For Debtor 2 or non-filing spouse
2.	\$ 0.00	\$ 0.00
3.	+\$ 0.00	+\$ 0.00
4.	\$ 0.00	\$ 0.00

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$ 0.00	\$ 0.00
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	5h. + \$ 0.00	+ \$ 0.00
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6. \$ 0.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 0.00
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: _____	8h. + \$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9. \$ 0.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 0.00 +	\$ 0.00 = \$ 0.00
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
	11. +	\$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12.	\$ 0.00
		<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input type="checkbox"/> No. Petitioner is temporarily unemployed. He is currently living off of 529 plan assets and money received		
<input checked="" type="checkbox"/> Yes. Explain: from sale of Road Runner car.		



**Fill in this information to identify your case:**

Debtor 1 Steven Bloom  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Michigan (State)

Case number 21-30257  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

**2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Child

Child

☐ No☒ Yes☐ No☒ Yes☐ No☐ Yes☐ No☐ Yes☐ No☐ Yes**3. Do your expenses include expenses of people other than yourself and your dependents?**

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

**4. The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 2,433.00

**If not included in line 4:**

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 100.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

	Your expenses
5. <b>Additional mortgage payments for your residence</b> , such as home equity loans	5. \$ 222.93
6. <b>Utilities:</b>	
6a. Electricity, heat, natural gas	6a. \$ 500.00
6b. Water, sewer, garbage collection	6b. \$ 0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 285.00
6d. Other. Specify: _____	6d. \$ 0.00
7. <b>Food and housekeeping supplies</b>	7. \$ 700.00
8. <b>Childcare and children's education costs</b>	8. \$ 0.00
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ 130.00
10. <b>Personal care products and services</b>	10. \$ 125.00
11. <b>Medical and dental expenses</b>	11. \$ 200.00
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 190.00
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ 50.00
14. <b>Charitable contributions and religious donations</b>	14. \$ 0.00
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ 0.00
15b. Health insurance	15b. \$ 0.00
15c. Vehicle insurance	15c. \$ 200.00
15d. Other insurance. Specify: _____	15d. \$ 0.00
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ 0.00
17. <b>Installment or lease payments:</b>	
17a. Car payments for Vehicle 1	17a. \$ 566.00
17b. Car payments for Vehicle 2	17b. \$ 0.00
17c. Other. Specify: _____	17c. \$ 0.00
17d. Other. Specify: _____	17d. \$ 0.00
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ 0.00
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. \$ 0.00
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a. Mortgages on other property	20a. \$ 0.00
20b. Real estate taxes	20b. \$ 0.00
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e. Homeowner's association or condominium dues	20e. \$ 0.00

21. **Other.** Specify: \_\_\_\_\_

21. +\$ 0.00

+\$

+\$

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$ 5,701.93

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.

22b. \$

22c. \$ 5,701.93

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 0.00

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 5,701.93

23c. Subtract your monthly expenses from your monthly income.  
The result is your *monthly net income*.

23c. \$ -5,701.93

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 Steven Bloom  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) \_\_\_\_\_  
First Name Middle Name Last Name

United States Bankruptcy Court for the Eastern District of Michigan

Case number 21-30257  
(If known)

☐ Check if this is an amended filing

Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /s/ Steven Bloom

Signature of Debtor 1

**X** \_\_\_\_\_

Signature of Debtor 2

Date 03/09/2021  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY